

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 346  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Association of Mutual Insurance Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Lisa M. Ayotte**

Mailing Address PO Box 30660

City  
Lansing

State  
MI

Zip Code  
48909-8160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

AVP- Real Estate & Operational Service

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2011

Transaction ID : 4206E437C305A78DBEF

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. James Baes**

Mailing Address PO Box 30660

City  
Lansing

State  
MI

Zip Code  
48909-8160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 26 / 2011

Transaction ID : BB3EABE9C6DEAD7E074

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Michael D. Baker**

Mailing Address PO Box 30660

City  
Lansing

State  
MI

Zip Code  
48909-8160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2011

Transaction ID : CE66A026DA879D1D5FD

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

580.00